required)

Filing

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## 1348.117.US **Attorney Docket Number** DECLARATION FOR UTILITY OR Patrick J. Butler First Named Inventor **DESIGN COMPLETE IF KNOWN** PATENT APPLICATION (37 CFR 1.63) **Application Number** Filing Date ☑ Declaration □ Declaration OR Submitted after Initial Submitted Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial

**Examiner Name** 

As a below named inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
Apparatus and Method for Mechanically Reinforcing the Welds Between Riser Pipes and Riser Braces in Boiling Water Reactors										
the specification of which (Title of the Invention)  is attached hereto										
	OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number and was amended on (MM/DD/YYYY) (if applicable										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of. America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co YES	opy Attached?					
			0000	0000						
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.										
Арриcation Number(s) Filing Dat		e (MM/DD/YYYY)	numb supple	ers are listed or emental priority	n a data sheet					
amended by any amendment specifically referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.  I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of. America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.  Prior Foreign Application  Country  Foreign Filing Date (MM/DD/YYYY)  Not Claimed  Priority YES NO  Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (12-97)
us sign (+) inside this box 

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

				Otili	• 7	OI L	763	<u>9'</u>	<u></u>	att	,,,,,,	שר	piicati	<u> </u>
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.														
U.S. Parent Application or PCT Parent Number						Parent Filing Date (MM/DD/YYYY)				Par	Parent Patent Number (if applicable)			
Number						/1414	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	,,,,				(п аррпса		
											1			
											l			
Additional	U.S. or	PCT international	ıl applicat	tion numbers	are lis	ted on a	supplen	nental	priorit	ly data	sheet P	TO/SB	/02B attached	hereto.
As a named inventor. I hereby appoint the following registered practitioner(s) to prospect this application and to transact all husiness in the Potential														
and Trademark Office connected therewith: Customer Number OR												•	Place Cusi Number Bai	Code
<del></del>	Registered practitioner(s					name/registration number listed below					Label here Registration			
	Nam			Number				Name						mber
	Robert H. Epstein Karen M. Gerken			24,353 31,161									i.	
A 4 4700										_				
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.														
Direct all correspondence to: Customer Number or Bar Code Label  OR Correspondence address be							ress below							
Name	Robe	rt H. Epstein												
Address	Epste	ein & Gerken												
Address	1901	Research Blvd., Suite 340												
City	Rock	ville					State	State MD			ZIP	20850		
Country	U.S.	Telephone (30				(301)	) 610-7634 <sub>F</sub>			Fax	<sub>ax</sub> (301) 610-9569			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.														
Name of Sole or First Inventor:							entor							
Given Name (first and middle [if any])							Family Name or Surname							
Patrick J. Butler														
Inventor's Signature		Patrick J. But			uH	Date 4/						4/16/0		
Residence: 0	City	Alexandria State VA				Country US						Citizenship	ÚS	
Post Office A	ddress	708 Arch Hall Lane												
Post Office Address														
City		Alexandria	State	VA	ZIP		22314			Country		US	US	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto														